9.9. Describe the process used by the state to accomplish involvement of the public in the design and implementation of the plan and the method for insuring ongoing public involvement. (Section 2107(c)) (42CFR 457.120(a) and (b))

The SCHIP program was initiated and authorized by specific action of the 1998 and 2000 South Dakota State Legislature which authorized the Department of Social Services to develop a program for low income uninsured children up to 200% of the Federal Poverty Level under the Federal Title XXI program.

Pursuant to this direction from the Legislature the Department of Social Services developed Administrative Rules for the administration and delivery of the SCHIP process. These rules were promulgated, heard, and implemented with the public process specified in the South Dakota Administrative Procedures Act. Public Notice was made in several newspapers and a Public Hearing was conducted to inform the public of the new program, eligibility, covered services, and other provisions of the SCHIP program.

Further public involvement was obtained by presentation of the SCHIP program to the Medical Advisory Committee, (meets semi-annually) and the Board of Social Services (meets quarterly) prior to implementation. The Medical Advisory Committee and the Board of Social Services are advisory groups that provide input into the design, implementation and operation of the Medical Assistance Program. (Titles XIX and XXI)

Inasmuch as the State Plan Amendment does not include a reduction in services or increase in cost sharing, but rather an expansion of services and coverage under the SCHIP program a public process is not required. However, with the public action of the South Dakota Legislature and the requirements of the Administrative Procedures Act, the Department has, in its judgement, allowed adequate public input in the design and implementation of SCHIP.

The Department recognizes that the SCHIP program does not differ significantly from the current delivery system and coverage under medical assistance programs in South Dakota, with the exception of expanded eligibility.

The Department will continue to actively solicit public involvement in the delivery of the Medical Assistance Program benefits under Titles XIX and XXI. The Department will ensure ongoing public involvement in the design and implementation of the SCHIP state plan through the processes described above.

In addition, the Department continues it's long-standing policy to provide for ongoing public involvement in the operation of the Medical Assistance Program. (Titles XIX and XXI) The Department has regular contacts with advocacy groups, and an open door policy to provide advocacy groups and individuals the opportunity to present input and feedback on the operation of the program. The Department meets with advocacy groups and individuals that request such a meeting.